

CIP 1 - ACTIVITY SUMMARY FORM FY2008

DEPARTMENT/ AGENCY: _____ CONTACT: _____ E-MAIL: _____
 PHONE #: _____

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[illegible]

<u>SPECIAL INSTRUCTIONS</u> * PLEASE LIST IN ORDER OF PRIORITY; DO NOT USE SUB-CATEGORIES (IE. 1, 1A ETC.) C = CITY F = FEDERAL (PLEASE INDICATE WHAT TYPE OF FUNDING NEXT TO EACH AMOUNT) O = OTHER S = STATE		Shared/CIP/FY2008
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